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THERAPEUTIC QUALITIES OF PRUSSIC ACID.

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THE lamented death of Mrs. Maclean has called the attention of the public to the merits of hydrocyanic acid as a therapeutical agent, and many have already imbibed the idea that prussic acid is a most dangerous poison, and perfectly useless in the treatment of disease. The London Times copied, recently, a long paragraph from the Edinburgh Courant, in which the writer observes, "It ought to be generally known that there are no diseases capable of being alleviated by prussic acid which may not be, with equal certainty, relieved by other and safer means. The patient, therefore, who uses it at his own risk, runs the most imminent hazard of his life; and the physician who prescribes it, *without the most cogent necessity*, does little *less than sport with the life of his patient*." The writer of these remarks has been twenty-two years in practice, during which period he has seen many thousand cases of all descriptions, and in all classes of society, and yet he has never once had occasion to prescribe prussic acid, having always accomplished the end he had in view by other means. He knows active practitioners, of still longer standing, who can make a similar statement; but he is *sorry to add that he knows much* YOUNGER MEN who employ it often and with much too little caution."

Now, sir, the writer makes a grave charge against the members of our profession. Happy man! he has treated "many thousand cases of all descriptions, and has always accomplished the end he had in view." Others, however, have not exercised the same skill, do not possess exactly the same chest of simples, and, therefore, with "too little caution," make use, frequently, of this valuable medicine; and I, for one, shall continue to use it, even at the risk of being accused of "sporting with the lives of my patients." Without being able to boast of "twenty-two years' experience," I may be allowed to mention the case of a young lady, who had for several days been unable to retain a particle of food upon her stomach; even fluids were immediately rejected; every means had been used by the medical gentleman who attended her, but in vain, and at his urgent request a physician was sent for. What was the remedy? R. Hydrocy. acid, two minims (Scheele's); orange syrup, thirty minims; water, one ounce; a draught every fourth or sixth hour; and I had the happiness of seeing my friend restored to health, the sickness ceasing after the exhibition of the second draught.

Nor is this a solitary case; only last week I saw it given in a similar case, though not so violent, with the best effect.

It has, however, justly been remarked, that some test ought to be enjoined to ascertain the strength of the acid employed. In the last edition of the "*Pharmacopœia Londinensis*" we have the *acidum hydrocyanicum dilutum*, which differs in strength from the preparation commonly used under the name of "*Scheele's*," and, therefore, in a remedy so important, as well as so powerful, a uniformity of strength ought to be preserved. Hydrocyanic acid consists of—

1 Nitrogen = 1 by 44 = 14

2 Carbon = 2 by 6 = 12

3 Hydrog. = 1 by 1 = 1

27

The strength of any solution of this acid may, according to Dr. Ure, be ascertained by adding to 100 grains of the hydrocyanic acid small quantities of the peroxide of mercury, in fine powder, until it ceases to be dissolved. The weight of the peroxide dissolved, divided by four, gives the quantity of real acid present. The rationale is this: the equivalent of peroxide of mercury, 216, happens to be just eight times that of prussic acid, 27; therefore, as the prussiate of mercury consists of two proportions of prussic acid to one of base, it is evident that the quantities of acid and of base in the salt are in the ratio of one to four.

Let us now examine the compounds of this acid.—*Laurel water*: this is the distilled water of the leaves of a species of cherry, the *prunus laurocerasus* of Linnæus, a native of the coast of the Black Sea, although it is now very common in Europe, into which it was brought about the end of the sixteenth century. It belongs to the natural order *amygdalacæ*. The volatile oil residing in the leaves and kernels of the fruit is combined with hydrocyanic acid. The flowers, as well as the leaves, have the odor and taste of the bitter almond and the kernel of the peach, and communicate both, readily, to boiling milk, cream, diluted alcohol, and other substances, in which form they are used as condiments—very improperly, and by ignorant servants.

Oil of bitter Almonds.—The seed yielding the greatest quantity of combined hydrocyanic acid, is the bitter almond—the kernel of the fruit of the variety of *amara* of the *amygdalus communis*, a tree which is a native of Barbary and Syria, but is now cultivated in Europe. The poisonous influence of the oil of bitter almonds was known so early as the time of Dioscorides, who states that it was employed for killing wolves, but it was not known until a German chemist, Böhm, ascertained the fact, that this influence greatly depends on the presence of hydrocyanic acid. According to the experiments of MM. Henry and Plisson, the constituents of oil of bitter almonds are—

Carbon - - - - - 74.40

Oxygen - - - - - 11.79

Nitrogen - - - - - 5.97

The powerful and poisonous effects of bitter almonds, eaten in large quantities, were observable at a very early period. Besides influencing

men, the volatile oil acts powerfully on quadrupeds, causing convulsions. The most remarkable instance of poisoning by laurel-water is that of Dr. Price, the alchemist, who, in 1782, poisoned himself with laurel-water a few days after repeating his experiment of converting mercury into gold. In cases of poisoning, it was remarked by Cullen as "a curious fact, that however instant its operation, no traces of inflammation were ever detected after death." But it was not till after hydrocyanic acid was ascertained by Bohm to be the active principle in laurel-water, that the cause of this was fully understood.

Strong Hydrocyanic Acid—that is, in its anhydrous state, is a powerful poison. A drop of it injected into the vein of a large dog produces instant death—quick in its effects as a flash of lightning, destroying the poor creature as quickly as a shock of the most powerful electrical battery; proving that it exerts its influence directly on the nervous sensibility, which it at once destroys, and not, as some have supposed, by being taken into the circulation. It affects all animals, from the worm to man. All who take it die; all are affected in the same manner; and even vegetables suffer in an equal degree. An instantaneous cessation of life takes place; yet the eyes remain open, appearing bright, animated, as though the vital spark had not forever fled from its tenement of clay. Yet, on opening the body, the heart may be observed to pulsate; as Magendie has remarked, "the animal may be dead with regard to its external functions, although still enjoying life through its nutritive faculties." I ought, however, to remark, that if the strong acid be employed, some difference takes place in the appearance of the eye, the extreme coldness caused by the evaporation rendering the cornea opaque when applied to it.

The public generally, however, are not aware that the medicinal acid differs from that fluid which is so justly dreaded, so justly regarded as a deadly poison. But are we, Sir, to give up the use of a remedy simply because, from its imprudent use, some few have fallen victims? Are we to abandon its exhibition because for "twenty-two years" a gentleman who will not "live and learn" has done without it? Are we no longer to use it because one of the most gifted of her sex was cut off by it? We might just as well give up the use of opium and its preparations, which is equally dangerous in unskilful hands. The drunkard, according to the doctrine of some, may be allowed to end his brief career amid the ravings of delirium tremens, because for "twenty-two years" some one has never seen a case, or seen a simple case get well without it, by laying the head upon a hop-pillow, and taking three drops of tincture of hyoscyamus three times a day.

I need not appeal to the members of our profession for proofs of the efficacy of prussic acid, as an external application in *prurigo*, inveterate psoriasis, and several other skin diseases attended with severe itching. They are well aware of the comfort it affords to the sufferer by allaying the severe itching and tingling by which they are attended. In chronic catarrh abundant examples have been afforded of its efficacy, which may be accounted for on the principle of allaying irritation, and thereby favoring a slower, and, consequently, a more healthy gastric secretion.

At least, such is the opinion of Dr. A. Todd Thomson, whose experience extends over a period of somewhat more than "twenty-two years." Dr. Elliotson has fully proved the advantages derived from the administration of this medicine in dyspepsia; and the relief which it affords in pyrosis (by allaying the irritation of the stomach) is too well known to require comment. "In hooping cough," says Dr. Thomson, "I regard it as the sheet-anchor of the practitioner, and I do not think I am stretching my praise of it too far in affirming that few cases of this disease would prove fatal were the hydrocyanic acid early resorted to, and judiciously administered."

At the same time it must not be forgotten that it is a powerful remedy—a medicine not to be played with; one which ought never to be taken except when prescribed by a medical man, and then the patient should never prepare the medicine himself; but of this I will say nothing. The fate of poor "L. E. L." speaks far more eloquently, far more conclusively, than any words which my pen can trace.—*Lon. Lancet.*

DR. BUGARD'S TREATISE ON GENERATION.

[Concluded from page 76.]

OF THE UMBILICAL CORD.—I consider the umbilical cord as a prolongation of the foetal part of the placenta. Its functions are described in the preceding article. It is generally composed of two arteries, which take their foetal origin in the internal iliac arteries; of a vein, and of cellular substance which holds these vessels together as in a sheath. It seems to be more or less twisted, and, to explain that circumstance, some physiologists, without considering how little importance should be attached to questions the solution of which can afford no practical advantage, have imagined that the foetus turns in the uterus, and that the cord is more or less twisted, according to the number of turns that have been performed. But might it not be asked, why should the foetus turn? Why should it execute evolutions which appear, if not impossible, at least very difficult? I feel confident that, in fact, the umbilical cord is not twisted, and that the appearance it presents is produced by the arteries, which, in a spiral form, surround the vein; and I have no doubt that were the cord carefully dissected it would be found that the arteries are much longer than the vein. I am inclined to think so, also, from the fact that the external part, or sheath, formed by the cellular texture, is never twisted. But, it might be asked, why should the arteries have such a spiral form, whilst the vein must, according to such an arrangement, be comparatively straight? It is in accordance with a principle of the animal economy, which may be noticed in almost any part of the body, by which veins are generally more direct in their course than the arteries; the latter being crooked in order to moderate or check the force of the circulation caused by the direct pressure exerted by the propelling efforts of the heart—the former being straight, in order to facilitate the course of the same fluid, it being deprived of such a propelling agent.

Of the Membranes.—The membranes are two, or rather three, in number; the amnion, which even in the vesicular gland is the external part of the vesicle, and which encloses the liquor amnii, the umbilical cord, and the embryo, or fœtus; the vera or propria, and the reflexa decidua. But the latter may be considered as a duplicature of the decidua vera, folded over itself by the action of the vesicle on entering into the uterus and expanding according to the growth or development of that which it encloses.

Of the Liquor Amnii.—I think that the liquor amnii is a secretion of the amnion, solely destined to the protection of the fœtus, though some physiologists have thought that its use was to afford it a suitable nourishment. This I cannot believe, because I cannot understand how a nutritive substance can pass through the process of digestion without producing excrement, and I doubt whether any have ever been found in the cavity of the membrane in which the fœtus is enclosed.

Of the Fœtus.—The fœtus, which at birth generally weighs about seven pounds, is the only object of the process of gestation or pregnancy, all the other products, such as membranes, placenta, &c., being but auxiliaries to its growth. I shall not undertake to describe the gradual or successive development of the parts of which it is composed, but shall mention only what may be found in any writer on this subject, viz., that during the two first months of pregnancy its growth is hardly perceptible externally; but that at the third month it is such that the uterus fills up the cavity of the pelvis, and towards the fourth it ascends into the hypogastrium; towards the sixth month the fundus of that organ rises to the height of the umbilicus; towards the seventh a little higher, and towards the eighth it almost extends to the epigastrium, which it reaches towards the ninth, and soon the whole abdominal tumor falls down, and thus announces the near approach of labor or delivery.

The fœtus is not always perfect, and the different imperfections which it presents may be divided into three classes: the first comprising those whose imperfections can be noticed only on the skin; the second those whose imperfections consist in the want, the deformity, or the addition of some part or parts of the body; and the third those that present the connection, more or less perfect, of two beings united together by some part of the body.

As to the first, I have nothing to add to what has been written on the influence that the mind of the mother exerts or may exert upon the fœtus; I must only acknowledge that I believe that when a pregnant woman experiences strong and violent impressions, her nervous system may receive such a shock that it may be communicated to her offspring, who may receive a mark of the object that was the cause of her excitement.

As to the second, I think that they are the result of imperfections that exist in the rudiments of the embryo, in the vesicle, even before fecundation; except in some cases in which a limb or part of a limb is missing, which may be owing to the action of the cord, having operated like a ligature.

As to the third, I believe that, as there are eggs that contain two

yolks, and seeds that contain two kernels, there are vesicles that are double—that is, they contain the principles of two beings, and that those beings come into the world more or less perfect according as the principles from which they are derived are more or less distinct or separated in the vesicle; and that the parts which are confounded in it, are those which are common to both beings, or those that are not double. But, after all, what real advantage can be derived from the solution of such difficulties? Not any; since before delivery no one can tell whether the object that a woman carries within her is a well-formed *fœtus* or a monster.

I cannot leave this subject without mentioning a very important fact in physiology, viz., that a double being was never found presenting the two sexes; I mean that in case of union, a male and a female were never found together, but always two males or two females. This circumstance would be a convincing and irresistible argument in favor of the theory that teaches that each vesicular gland secretes the principles of only one sex; for were it not so, why could we not find, once in several thousand cases, that a male and a female are united together by some part of the body?

Although I am far from having exhausted my subject, since I should have said something of the signs of pregnancy, of the diseases which it causes, of the accidents to which it exposes, of the cares it requires, of the peculiarities that a well-formed *fœtus* presents, whether in its thymous and thyroid glands, in its lungs, circulation, fontanelles, renal capsules, &c.; of labor and lactation, yet I must conclude my dissertation. But will the ovists, whose maxim is *omne vivum ex ova*, pardon me for having used the names of vesicles and vesicular glands, instead of ova and ovaries? I doubt it. However, I hope that they will appreciate the reasons that I have given in support of my opinion on this subject. Should it not be so, I would almost feel disposed to offer them, as a term of conciliation, to give the name of ovum to what is contained in the uterus at the time of labor. Then its resemblance, or rather analogy, to an egg of a fowl, is less imperfect; since the amnion may represent the membrane of the egg; the decidua may represent the shell; the liquor amnii, the white; and the *fœtus*, the yolk. But what an effort is required to perceive that analogy! That which exists in the reproduction of plants and the human race is certainly much greater and more striking; for if we follow it through its progress, we may notice that the vesicle or seed, after having been fecundated, detaches itself from its capsule, where it leaves the pedicle (*corpus luteum*) which holds it in the capsule (vesicular gland), it falls or is carried to the place destined for it by nature; there it stops and attaches itself by its hylum, and strikes root. Its roots absorb the juices that are necessary for the development of the principles which it contains, and which circulation takes to the places where they are necessary. As soon as the roots (the placenta) have commenced their functions, the plant (the umbilical cord) grows, as well as the fruit (the *fœtus*) which it is to produce. That fruit, which at first is imperceptible, grows until it is ripe; and then the covering parts (the membranes) burst and open, and let fall

what they contain (the *fœtus*), which, like any other seed, is to serve, some day, in its turn, for the reproduction of its own species ; and the poor plant that produced that new being, like any other annual plant, dies, falls, dries, and decomposes itself, to return to the first principles of matter whence it came.

MEDICAL ESSAYS.—NO. V.

[Communicated for the Boston Medical and Surgical Journal.]

HAVING suggested to the reader certain prophylactic or preservative measures of a *negative* character, we shall now proceed to the consideration of such as may more appropriately be called *affirmative* ; and the first will be *Exercise*.

We trust that our readers will relieve us at once from making any effort to show that *bodily exercise* of some sort is indispensable to the enjoyment of good health. There is one pre-requisite or important condition, however, in regard to bodily exercise, that may be said to constitute the sum and substance of all the benefit to be derived from it, and that is, it must be *habitual*. It is manifest that sudden and violent efforts of the body can scarcely fail of being injurious, even when there happens to be no displacement or disorganization of any vessel. Almost all kinds of manual labor, and the labors of agriculture, have a salutary tendency. Certain gymnastic exercises are healthful ; but for want of proper management or system, these establishments in our own country, as yet, appear to be temporary, or unproductive of the benefit sought for. Of the two principal kinds of exercise, riding on horseback and walking, the latter, when habitually pursued, is supposed to have the preference. On hearing a youth solicit a kind father for a horse to ride, an elderly physician, who happened to be present, inquired of the young man for what purpose he wanted a horse, and to the reply, rejoined as follows. "Don't you know," said he, "that riding is being exercised, and that walking is exercising." This remark we have often had occasion to repeat with satisfaction to ourselves, and apparently so to others. In the advice given by medical men to invalids in regard to exercise on horseback, there is often too little stress laid upon the gait of the horse, the nature or character of the country ridden over, the distance of riding, and the weather. These are indispensable considerations. There is scarcely any portion of our country, in which a moderate and habitual walk, taken early in the day, or some other gentle and out-door exercise, in good weather, will fail of being healthful. It would seem that early rising, in order to fulfil its high and noble pretensions, should be accompanied, as far as practicable, with some out-door exercise. It is observed, however, that in the climate of the southern border of the Union, and in the warmer months, the practice of sitting by a fire early in the morning, is often found beneficial. We were acquainted with a man of plain manners, but good sense, living in the State of Mississippi, who was regularly in the habit of rising early in the warmer months, and sitting an hour or two by a comfortable

fire. It may be thought unreasonable to require servants or laborers to expose themselves to the morning dews; and yet we would not hesitate to make it a rule for every person to rise early, and in good weather take the morning air, and, if practicable, perform some out-door exercise or labor.

The benefit to be derived from walking is promoted very much by the motion of the arms. This is generally uniform, alternating with the motion of the lower limbs, and helping to preserve the principle of gravity. The motion of the arms and hands is more intimately concerned with the general circulation than some are aware. Hence we have occasionally employed the term *rotatory*, as expressive of a peculiar motion of the hands (both hands being rotated upon the wrist at the same time), which we have known performed with manifest and great advantage; and particularly, as it facilitates (by way of the circulation) the alvine discharge, and prevents the accumulation of foetid gas in the stomach and bowels. The theory of this exercise (if it may be called a theory) consists not only in the diffusion of more blood into a particular organ or tissue, but also in giving an additional and healthful velocity to the circulation. The circulation, from various causes, may become languid, and some local or general injury may be the consequence. It is the opinion of an eminent medical author, that when the circulation becomes languid, the nervous and lymphatic systems predominate of course. But more of this hereafter.

We shall now proceed to offer a few remarks upon the sitting and lying down postures. Many a student, as well as many an individual of a sedentary habit, finds his health materially injured by the posture of bending or leaning forward over a low table, and by that unnatural posture of the body that generally takes place in using leaf chairs. It is manifest, from the construction of the thorax or chest, that it will not admit of being compressed with safety. The posture of leaning forward upon a low table, must of course affect the circulation by way of pressure. We trust this remark will not be found inapplicable to the female sex, who, one would suppose, would experience a still greater injury, from any unnatural compression of the chest. The effect produced in this way, we have signified, is somewhat similar to that of wearing corsets; the very naming of which, is amply sufficient to excite an apprehension of evil. As the labors of women are generally performed within doors, and usually in a sitting posture, it would seem incumbent upon them all to avoid the evil alluded to. It is indeed wonderful to see how extensively this bad posture of sitting prevails among both sexes. We cannot tell precisely how this matter stands in France and England and other countries, but it is certainly a reproach to us Americans. It is said, by way of reflection upon this country, that an European gentleman seldom or never leans backward in his chair. But admitting that this posture is not altogether commendable, yet as it does in a good degree secure the erect position (which we contend for), it cannot be very injurious to health. As it is not within the scope of our design to particularize, we shall say nothing concerning the form of the chair, or upon the practice of sitting cross-legged or otherwise, provided the reader will duly reflect

upon the reasonableness as well as dignity of sitting in the erect position.

In regard to lying down for rest and the nature of beds generally, and the form of bedsteads among us, we would suggest a few thoughts. One would suppose that the temporary pleasure of lying upon a high feather bed and under a superabundance of bed-clothing, would yield at once to the consideration of health and comfort. Nothing is more manifest than that the recumbent posture of ninety-nine out of a hundred among us, is peculiarly unnatural and injurious. Many persons place themselves, body and limbs, in such a condition or posture as necessarily to produce a stoppage of the circulation, if not an irksome or painful state of the muscles. How often is this practice accompanied with broken rest, terrifying dreams, and consequent ill health. All beds of rest require but a moderate quantity of feathers; and, in our humble opinion, the bedstead should be a little elevated at the head, and which is properly represented by a gently inclined plane. The French people, many of them, make use of the mattress bed to much advantage, and we cannot but hope that our good citizens will follow the example, and become wiser in that particular, and consequently rest better, rise earlier, and become a more healthy and hardy race. There is good reason to promise ourselves much from the late invention of India-rubber beds, especially as they are well adapted to the comfort of the sick and convalescent. But as we have little experience in this matter, we say but little.

There is scarcely anything more essential to good health, than regular alvine evacuations. The extent of the alimentary canal, its relations and connections, as well as its peculiar structure, render it an important subject of consideration, both in health and sickness. We are not at all surprised that the celebrated Broussais should make it the ground work of his whole system. Its structure and position manifestly render it liable to great and constant derangement. Although we firmly believe, that in nine cases out of ten, proper diet and proper exercise will secure the healthy action and condition of this canal, or restore it from any derangement that may occur, yet the disposition and circumstances of many are such, that when obstructions or derangements occur in it, a resort to purgatives becomes advisable. All know and feel the evil of constipation, and few can fail to recognize its tendency to undermine the system. Accordingly we see one and another resorting to some means of removing the evil; and for want of proper knowledge and prudence, they often make use of the most violent and acrid purgatives. Purgatives are often given (especially by quacks) for no other purpose than to remove the hardened and offensive fæces. "A knowledge how to regulate the alvine evacuations," says the immortal Hamilton, "constitutes much of the prophylactic part of medicine. It may be proper, on some occasions, to advise the patient to re-trace the footsteps by which he has deviated from simple nature; and to court pure air, moderate exercise, and simple diet. When this does not remove costiveness, and the ills which proceed from it, the interposition of purgatives will be necessary." "A purgative," says one, "is a medicine which operates more

powerfully on the bowels than a laxative; stimulating the muscular, and exciting increased secretion from the mucous coat."

Much evil arises from an indiscriminate use of purgatives, and especially from the frequent use of those that are acrid and drastic. The empiric has one or two sovereign purgatives, and no matter how violent and acrid the stimulus! All the virtue there is in his purgative lies in its sure and violent operation! He will also, at the same time, present you with a pill that is *sure* in its operation, and so constructed (being altogether vegetable) as to be free from violence or inconvenience! This is a specimen of logic somewhat of a piece with that which expels every fever by creating a fire that will burn out the sooner by an excess of stimulation! The common mistake in regard to purgatives lies in not selecting that which is suited to the case, and not administering the proper quantity. A saline purgative is, doubtless, often to be preferred, but it is as important to regulate the dose of salts as any other dose. There is, perhaps, no one purgative, for and against which so much has been said and written, as *calomel*. Calomel, however, is proscribed forever by the empiric! He calls it *rank poison*, and says it is sure to destroy both life and health. And we will grant that he is in this instance, and for once, deserving of some credit on the score of consistency. He is absolutely ignorant of the nature and proper operation of *calomel*, and therefore in his hands it becomes an *edged-tool*, which should never be in the hands of the *ignorant*, the *prejudiced*, or the *insane*. It is admitted by all wise and experienced physicians, that calomel should be used with great caution, and be followed at a proper time (except when given in very minute doses) with oil or some other purgative. The bowels of some persons require stronger purgatives than others; and all we have to say is, that those persons should be doubly cautious in the use of them.

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DISEASES OF FEMALES.*

DR. CHURCHILL is known to us, and to the readers of foreign medical periodicals, as the author of many excellent papers on midwifery subjects. In them he has shown himself a careful observer, and very able reporter of what comes before him. His offices of physician to a large lying-in charity, and of lecturer on midwifery in a medical school, have offered rare opportunities for observation, and a strong motive to make the very best use of them. Dr. Churchill has always shown in his writings that he has been faithful to his opportunities and duties; and the student and the profession generally are now placed under new and greater obligation

* Outlines of the Principal Diseases of Females. Chiefly for the use of Students. By Fleetwood Churchill, M.D., &c. &c. Dublin: 1838.

to him for this extended and very useful work. The medical schools of Dublin have done a great deal for the profession. We rejoice that so much advantage has been taken, in that great city, of the abundant means furnished for medical observation, and for advancing the art. In midwifery a vast deal has been done. Who does not feel under deep obligation to the late Master of the Dublin Lying-in Hospital, for his excellent writings, and the present Master is faithfully carrying forward the labor of his predecessor.

We very much like the general plan of Dr. Churchill's work. It is divided into *text* and *notes*—the latter following directly below the former. The text contains matter of practical interest, what the student is to be prepared by for the exigencies of actual practice. The notes are philosophical criticisms of the contents, or doctrines in the text. They are very valuable. They contain, for the most part, opinions of others, more or less at variance with those of our author, and are given in their language. While, therefore, for general purposes, the volume may be well consulted in the text, we recommend to the student to study the notes with great care. He will so learn the value of what he has collected from the body of the work, and arrive at a juster estimate of its practical truth.

This volume contains two parts. The first part is devoted to the diseases of the external genitals. Part second, to the diseases of the internal genitals, the latter being broken into sections for the greater convenience of treating the diseases of particular organs. This part, with the exception of about twenty pages, fills the volume.

Dr. C. gives to his subjects the attention which their importance demands. Hence, though his book is a long one, it is truly practical. Look at his descriptions of disordered and diseased menstruation, states which require so much medical care, and which are so rarely wholly relieved. We have read all this with care and profit. Dr. C. describes three *forms* of menorrhagia. The third he thinks has not been before noticed. We extract the description.

"The *third form* differs considerably from the other two. The discharge is more profuse and its effects more severe; it is accompanied by marked alterations in the condition and relations of the uterus, occurs at a later period of life, and is more difficult to cure.

"The attack is not confined to any one kind of constitution or temperament; it occurs in the plethoric and in the debilitated, in the melancholic as well as in the sanguine. I have never seen it in a patient under 40 years of age, nor after the cessation of the catamenia.

"The attack is preceded for some time by irregularity of the menses, both as to time, quantity, and the duration of each period, with occasional uterine leucorrhœa during the intervals. It is not until the menses have flowed naturally for about 24 hours that the sanguineous discharge appears. Large clots are then expelled, in addition to a great increase in the fluid discharge. At first, the attack lasts 7 or 10 days only, but in cases of longer standing I have occasionally known it to continue throughout the interval, and terminate after the next period either gradually or suddenly.

"The quantity lost, varies, of course; it is sometimes very large; it was sufficient in one case to excite fears of a fatal result.

"The recumbent posture appears to have no effect upon the discharge, there being as much observed during the night as the day. Any exertion or long standing never fails to increase the amount.

"During the attack the patient complains of excessive exhaustion, of a sense of weight in the pelvis, of a dull pain there occasionally, and of weakness of the loins. In all the cases I have seen, there was considerable dysuria, especially after long standing; several, indeed, were obliged to lie down before they were able to evacuate the contents of the bladder completely.

"The general health, of course, suffers considerably; the appetite diminishes, the tongue is clean, though pale, the bowels become constipated, the surface blanched, and the strength much reduced.

"The pulse is occasionally quickened, but more generally quiet, and enfeebled in proportion to the loss of blood.

"An *internal* examination will detect the os uteri somewhat lower in the pelvis, and directed more towards the sacrum, than usual. It is rather more patulous than in a perfectly healthy subject, even at the time of menstruating, and the cervix is more or less swollen, especially anteriorly, where it expands into the body. It appears to be tilted forward by its increased weight, so as to press upon the bladder, thus affording a satisfactory explanation of a symptom (the dysuria) which I have noticed in every well-marked case of the disease. No increased heat is observed in the vaginal canal or about the cervix. The cervix and body of the uterus are generally, but not always, slightly tender on pressure. When the finger is withdrawn, it is found covered with a sanguinolent discharge somewhat thinner than blood, and devoid of smell.

"The amount of these changes will vary in different cases; in some, the cervix appears the part chiefly affected; whilst in others, the body of the womb, as far as the finger can reach, feels greatly swollen. The discharge seems to be always in exact proportion to the degree of uterine congestion."

We have seen this form of menorrhagia. We have known it in one case fatal, and in another it threatened life. The enlargement of the womb from retained clots was most striking in one case. It disappeared entirely. Cold astringent injections per vaginam were freely used in these cases, and without harm. Ergot, so much relied on in small doses by Dr. C., was not used in any of them.

Dr. C., in his chapters on *amenorrhœa*, says but little of a symptom of *amenorrhœa* which has been noticed in this city, and described by one of our ablest physicians. This symptom is *dysuria*. This belongs to that form of *amenorrhœa* which follows the sudden suppression of the catamenia by wetting the feet, &c. Along with this symptom is frequently associated another, circumscribed severe soreness and pain in the abdomen, somewhere in a line drawn from the umbilicus to the spine of the left ilium, and lastly, sudden discharges of pus from the vagina. We cannot but think our author must have met with this assemblage of symptoms in the form of *amenorrhœa* referred to. Yet he speaks of it as a rare occurrence. We only add that the disease we allude to thus briefly, is most painful and most lasting.

We thank our friend in New York for this presentation copy of Dr. Churchill's work, a reprint of which could hardly fail to be acceptable in this country. We might name others eminently worth publishing here—such are Montgomery on the Signs of Pregnancy, if accompanied by the plates—all Ingleby's midwifery writings—Kennedy's and Robertson's. These would form highly valuable additions to our midwifery literature, and could not fail to be widely purchased.

Monograph of the Ligneous Plants indigenous to Ohio.—Professor Rid-dell, a pattern of scientific industry, patience and learning combined, has completed an analytical table, which, to the botanist in that region, must be exceedingly valuable. He says the arrangement which he has adopted depends solely upon the diverse forms and characters of the leaves. "Having, for instance, the foliage of some wild woody vine before us, we first," says the professor, "see whether one or more leaves are attached to the same foot-stalk. If but one, the vine falls in Division I. Example—Div. I., leaves simple. Class I., leaves entire on the margin." "We then examine the margin of the leaf and find it notched, perhaps. This circumstance throws it into the 2d class, and being a vine, it necessarily belongs to the 12th section." Not being very conversant with botanical pursuits, we are incapable of appreciating the labors of this indefatigable man in the particular department to which he is now calling the attention of the public; but in other branches of natural science, he has given such repeated evidences of high attainments, that we have a proud satisfaction in referring to his achievements. A number of years appear to have been devoted to perfecting his new method of classifying plants and testing its correctness, which the ingenious author fully believes will facilitate and simplify the delightful study of botany.

Northern Dispensary of New York.—A correspondent, in the city of New York, has kindly presented us with the eleventh annual report of that uncommonly well-conducted and flourishing charity, the Northern Dispensary. It is totally unlike the dispensary of Boston, in this respect—viz., there appears to be a central depot where the poor may go for medical advice from 8 o'clock in the morning till 3 P. M. Thus all patients laboring under diseases of the *eye and ear*, are treated by Drs. Wallace and Blakeman—gentlemen of high professional standing in that particular department of surgery. In diseases of the *heart and lungs*, Drs. Cammann and Borrowe; *head and bowels*, Drs. Elder and Steele; *skin*, Dr. Gunn; *women and children*, Dr. Earle; *dentistry*, Dr. Baldwin—and all diseases contemplated in surgery, not classified, fall to the care of Dr. Cairns. This is not all; a house physician, with an assistant, has charge of those requiring medical attendance at their dwellings. This admirably-conducted dispensary appears to be entirely supported by the generous liberality of the citizens. The idea of setting apart a physician for a particular malady, strikes us very favorably, as it pre-supposes a thorough knowledge of the disease, or rather, that a thorough knowledge of it will be acquired. Such was the Egyptian method of practising medicine, says Herodotus—one man prescribed for the ear, another for the eye, and another for the teeth. Such is manifestly the tendency in our times, in the great cities, and it is the only way of becoming eminently qualified for rendering the best professional services—to learn to do one thing as well as it can be done.

Dr. Hull's Utero-abdominal Supporter.—We are gratified to notice that this instrument has received the sanction of very many medical men in Europe as well as in America; and from its undeniable success, has proved itself a truly valuable surgical expedient in cases for which it is so well contrived. Having repeatedly called the attention of physicians to

this subject, it seems almost unnecessary to urge it further upon their consideration.

Medical Institution of Yale College.—The committee to examine candidates for medical degrees and licenses, convened in the Medical Institution of Yale College, on Wednesday, February 27, and continued in session until March 1. Present, on the part of the Connecticut Medical Society, Dr. SILAS FULLER, President of the Society, and Drs. Thomas Miner, Luther Ticknor, Dyar T. Brainard and Earl Swift, and, on the part of the College, the six medical professors.

The following gentlemen, being found duly qualified on examination, were added to the Degree of Doctor in Medicine, by the President of the College, viz.:

Ebenezer Bingham Allen, Lisbon; Shubael Fitch Bartlett, East Windsor; Horatio Bryant, New Haven; Elijah Wells Clark, Wethersfield; Henry Gassett Davis, Worcester, Mass.; Joseph Durfey, Groton; Asa Witter Fuller, Lisbon; Otis Deming Goodrich, New Haven; James Lawrence Hall, Litchfield; Allyn Merriam Hungerford, Watertown; De Witt Clinton Jayne, Florida, N. Y.; Joao Francisco Lima, Maraham, Brazil, S. A.; Sidney Haskell Lyman, Warren; Augustus Mitchell, Portland, Me.; Nathan Strong Perry, Sharon; Benjamin Franklin Smith, Waterford; and William Wickham Welch, Norfolk.

The following, being found qualified for Licenses to practise physic and surgery, received diplomas from the President of the Connecticut Medical Society, viz.:

Josias Byles, Griswold; and Ebenezer Clark Smith, Washington.

An able and interesting address to the candidates was delivered, on the day previous to the examination, in presence of a large audience, by Thomas Miner, M.D., a member of the board of examination, and late President of the Connecticut Medical Society.

A Physiological Phenomenon, or the Snake Man; Robert H. Copeland.—This most singular being, perhaps, has not a parallel in medical history. He is now about 29 years old, of ordinary stature and intellect. His deformities and physical peculiarities are owing to a fright his mother received from a large rattle snake attempting to bite her, about the sixth month of pregnancy. For several minutes, after the snake struck at her, she believed herself bitten just above the ankle; and so powerfully was her mind affected, that, when she was delivered, the child's will was found to have no control over his right arm and right leg, which are smaller than his left extremities. He can use his right leg now sufficiently to walk in a hobbling manner, but cannot retain it stationary without the aid of the weight of his body. His right hand has the usual number of fingers, but they are smaller than those of his left hand. The wrist-joint is looser than usual, and his hand stands at an angle with his arm. His front teeth are somewhat pointed, and incline backward, like the fangs of a snake. The right side of his face is sensibly affected; his mouth is drawn considerably farther on the left side; his right eye squints, has several deep grooves radiated from it, and has a very singular appearance, much resembling a snake. But perhaps the most extraordinary circumstance on record is, that his right arm, when not restrained, will draw the lower part to about a right angle with the upper, and sometimes two or

three, but most commonly only the fore finger, will project, curved at the first joint, much resembling a snake's head and neck, when in the attitude of striking; and the whole arm will strike at an object with all the venom of a snake, and precisely in the same manner, for two or three and sometimes for four or five strokes, and then the arm assumes a vibratory motion, will coil up and apply itself close against his body. During this period his right foot and leg become excited, and if not restrained, will strike also. His face is also excited; the angle of his mouth is drawn backward, and his eye snaps more or less, in unison with the strokes of his hand, whilst his lips are always separated, exposing his teeth, which, being somewhat pointed like the fangs of a snake, causes his whole visage to assume a peculiar and snaky aspect. During infancy and childhood, the whole shape of the snake, even to its fangs, was printed on the anterior of his leg; but as he grew up it became gradually obliterated, till now there is only a small depression where the snake's head was imprinted. The sight of a snake fills him with horror, and an instinctive feeling of revenge; and he is more excitable during the season of snakes; and even conversation concerning them excites him, and his arm appears more anxious to strike than when no such conversation is going on. All the above phenomena are perfectly independent of his will, as hundreds can testify who were acquainted with him long before he had any idea of exhibiting himself publicly. This singular being was born in Carolina, and moved to Georgia in the year 1829, where he has since remained, performing such labor as he could with one hand, and by unremitting exertions has maintained his wife and an increasing family. His physical peculiarities being considered only in the light of a common deformity, he never thought of exhibiting himself publicly, till it was suggested to him by a medical friend in 1837.—*Southern Med. and Surg. Jour.*

The names of eight physicians and others are attached to the above account, certifying that it is substantially true.

Medical Miscellany.—Dr. Miner's address to the candidates for degrees and licenses in the Medical Institution of Yale College, just published, should be read by every pupil in the country—it contains good advice in a compact form—the contemplations of a sage, with the wisdom of a Christian philosopher.—There were 146 interments in New York, last week—men, 41; women, 29; boys, 44; girls 32.—No. 12, of a new Thomsonian Journal, called the *Lobelia Advocate*, has appeared at Baltimore. At the present rate of multiplication, the believers in the Thomsonian farce of physic will have a paper a-piece.—The treasurer of the Eye and Ear Infirmary, in Boston, acknowledges a donation of one hundred dollars from the Hon. Daniel Waldo, of Worcester, Mass.—Dr. Eleazer Balfour has been appointed Surgeon of the Marine Hospital, at Baltimore, in place of Dr. Robert Stark, deceased.—The deaths in Cincinnati, in 1838, were 1356—more than one half being children under five years of age.

TO CORRESPONDENTS.—The dissertation on Anæmia, and the papers of Drs. Reynolds and Palmer, are on file for publication.

Whole number of deaths in Boston for the week ending March 16, 37. Males, 18—females, 13. Of consumption, 6—inflammation of the lungs, 1—scrofula, 1—croup, 2—convulsions, 2—dropsy on the brain, 2—scarlet fever, 4—cramp in the stomach, 1—old age, 1—inflammation of the brain, 1—lung fever, 1—chronic diarrhoea, 1—dys, 1—canker in the throat, 1—drowned, 1—intemperance, 1—dissease of the brain, 1—marasmus, 1—child-bed, 1—palsy, 1—canker rash, 1—paralytic, 1—stillborn, 1.

OUTLINES OF THE INSTITUTES OF MEDICINE,

FOUNDED on the Philosophy of the Human Economy in Health and in Disease, in 3 Parts. By Joseph A. Gallup, M.D., author of Sketches of Epidemic Diseases in the State of Vermont, late Professor of Theory and Practice in the Vermont Academy of Medicine, and of the Clinical School of Medicine, Ex-president of the Vermont Medical Society, Hon. Member of the Medical Society of the State of New York, &c. 2 vols. 8vo., pp. 876.

"As the writer has been chiefly induced to undertake the labor of the above work, in consequence of two very courteous memorials addressed to him from all the students present of two classes at different medical institutions, requesting a publication of his lectures, or the principles embraced in them, he has presumed, with respectful regards, to present these outlines to the Students of Medicine in the United States, with a hope of their being in some measure useful to the Science of Medicine."

Extract of a Letter from Professor J. W. Francis, M.D.—"Having read the manuscript of Dr. Gallup, on the Institutes of Medicine, I am free to remark, that it is the result of great research, and long and extensive medical experience. The author, while occupied as an observer, has recorded his impressions, with the praiseworthy design of adding to the stock of sound practical information. His book will be read for the originality and excellence of many of his views, and the masculine development of the writer's reflections. It will deserve and find a place in the library of the student, and be often consulted by the medical practitioner with advantage."

"New York, 1838."

Just published by OTIS, BROADERS & CO., 120 Washington street, Boston.

M 29.

PRIVATE MEDICAL INSTRUCTION.

Two subscribers are associated for the purpose of giving a complete course of medical instruction. Their pupils will have regular access to the medical and surgical practice of the Massachusetts General Hospital. They will be admitted, also, to the practice of the House of Correction, which constantly presents a large number of important cases, and where opportunities will be afforded for acquiring a practical knowledge of compounding and dispensing medicines. They will be furnished with opportunities for the study of Practical Anatomy, not inferior to any in the country. To the pupils, particularly to those in the last year of their professional studies, facilities will be afforded for acquiring a personal acquaintance with private medical and obstetric practice. Instruction by examinations or lectures will be given in the different branches of medical studies, during the interval between the public lectures of the University. Books, and a room with fire and lights, will be furnished to the students at the expense of the instructors.

Oct 31—eptf

GEORGE C. SHATTUCK,
WALTER CHANNING,
JOHN WARE,
GEORGE W. OTIS, JR.,
WINSLOW LEWIS, JR.

SCHOOL FOR MEDICAL INSTRUCTION.

Two Subscribers propose establishing a private Medical School, to go into operation the first of September next. The advantages of the Massachusetts General Hospital and other public institutions will be secured to the pupils; and every attainable facility will be afforded for anatomical pursuits. Regular oral instructions and examinations in all the branches of the profession, will form a part of the plan intended to be pursued.

On the Practice of Medicine and Materia Medica, by

Dr. BIGELOW.

On Anatomy and Surgery, by

Dr. REYNOLDS.

On Midwifery and Chemistry, by

Dr. FROREN.

On Physiology and Pathology, by

Dr. HOLMES.

Dissections will be carried on throughout the year, and a course of Lectures on Practical Anatomy and Surgery will be given in the interval between the Medical Lectures of Harvard University.

A room will be provided in a central part of the city, with all the conveniences required by students.

JACOB BIGELOW,
EDWARD REYNOLDS,
D. HUMPHREYS STOKER,
OLIVER W. HOLMES.

Boston, August 17, 1838.

Aug 22—ep3m

MEDICAL INSTRUCTION.

The subscribers are associated for the purpose of giving Medical Instruction. Students will be admitted to the medical and surgical departments of the Massachusetts General Hospital, may see cases in one of the Dispensary Districts, and have abundant opportunities for observing the smallpox and varioloid diseases. They will receive clinical instruction upon the cases which they witness, and during the interval of the regular lectures at the College, they will receive instruction by lectures and recitations upon the various departments of medical science. Ample opportunities will be afforded for the cultivation of Practical Anatomy. They have access to a large library, and are provided with a study, free of expense.

Applications may be made to either of the subscribers.

M. S. PERRY, M.D.
H. I. BOWDITCH, M.D.
J. V. C. SMITH, M.D.
H. G. WILEY, M.D.

July 25—eptN—emtJy

SITUATION.

A YOUNG PHYSICIAN, in a town about 13 miles from Worcester, wishes to sell from two to three hundred dollars worth of personal property, consisting of a horse, gig, medicine, &c.; and emigrate. Town contains about 2000 inhabitants—two religious societies, and good schools through the year. A letter to the editor of the Journal, post-paid, will direct to the town and physician, of whom the conditions and any particulars may be obtained.

M 6—4teop.

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